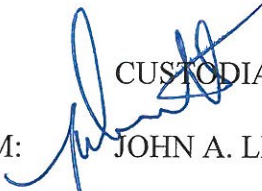


MEDICAID SERVICES MANUAL
TRANSMITTAL LETTER

April 14, 2009

MEMORANDUM

TO: CUSTODIANS OF MEDICAID SERVICES MANUAL

FROM:  JOHN A. LIVERATTI, CHIEF, COMPLIANCE

SUBJECT: MEDICAID SERVICES MANUAL CHANGES
CHAPTER 2200 – HOME AND COMMUNITY BASED WAIVER
FOR THE FRAIL ELDERLY

BACKGROUND AND EXPLANATIONS

The Centers for Medicare & Medicaid Services (CMS), Final Rule, published June 5, 2008 revises the existing conditions of participation that hospice must meet to participate in the Medicare and Medicaid programs.

The final rule clarified recipients of home and community based waiver programs who are enrolled or elect to enroll in a hospice program may be eligible to remain on the waiver if they require waiver services not covered under the hospice program to remain in the community. Since the Nevada State Welfare Division (NSWD) has changed their name to the Division of Welfare and Supportive Services (DWSS), references made throughout the chapter have been updated to reflect this change. Changes to the chapter are effective upon approval of the Public Hearing.

MATERIAL TRANSMITTED

MTL 06/09

CHAPTER 2200 – HOME AND
COMMUNITY BASED WAIVER (HCBW)
FOR THE FRAIL ELDERLY

Sec. 2200

Added “the Nevada Check Up Manual,
Chapter 1000“

Sec. 2203.4A.6

Added “Recipients of the Waiver for Frail Elderly who are enrolled or elect to enroll in a hospice program may be eligible to remain on the waiver if they require waiver services to remain in the community. Close case

MATERIAL SUPERSEDED

MTL 14/03

CHAPTER 2200 – HOME AND
COMMUNITY BASED WAIVER
FOR THE FRAIL ELDERLY

Deleted “Chapter 3700”

Deleted “If the recipient is in a Medicaid or Medicare funded hospice program, the recipient if not eligible to receive this waiver service.”

coordination between the hospice agency and the waiver case manager is required to prevent any duplication of services. Refer to Medicaid Services Manual Chapter 3200 for additional information on hospice services.”